

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Jiten Chatterji et al.)
)
)
Serial No.: unknown) Art Unit: unknown
)
Filed: Concurrently herewith) Examiner: Unknown
)
For: COMPOSITIONS AND METHODS)
FOR PREVENTING COAGULATION)
OF WATER-IN-OIL EMULSION)
POLYMERS IN AQUEOUS SALINE)
WELL TREATING FLUIDS)

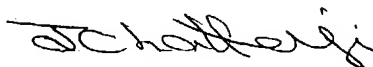
Assistant Commissioner for Patents
Washington, D.C. 20231

ATTENTION: Group Director

DECLARATION IN SUPPORT OF PETITION
TO MAKE SPECIAL BECAUSE OF APPLICANT'S AGE
(37 C.F.R. § 1.102(c) and M.P.E.P. § 708.02, IV)

I, the person signing below hereby declare:

1. That, I am over 65 years of age; and
2. That, all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.



Jiten Chatterji

Practitioner's Docket No. HES 2003-Ip-011145U1

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Jiten Chatterji et al.

Application No.: 0 / unknown Group No.: unknown

Filed: concurrently herewith Examiner: unknown

For: Compositions and Methods for Preventing Coagulation of Water-In-Oil
Emulsion Polymers In Aqueous Saline Well Treatment Fluids

Assistant Commissioner for Patents
Washington, D.C. 20231

EXPRESS MAIL CERTIFICATE

"Express Mail" label number ER276299506US

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Specification with 18 pages

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Declaration

Power of Attorney

Assignment w/recordal sheet

Statement under 3.73(b)

Fee Transmittal

Patent Application Transmittal

Petition to Make Special

Information Disclosure Statement, PTO-1449 & References

is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10, on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

Sheila Gibbs

Typed or printed name of person mailing paper or fee

Sheila Gibbs

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(Express Mail Certificate [8-3])

**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	
Filing Date	
First Named Inventor	Jiten Chatterji
Title	Compositions and Methods
Art Unit	
Examiner Name	
Attorney Docket Number	HES 2003-IP-011145U1

I hereby appoint:

☐ Practitioners at Customer Number:

OR

☒ Practitioner(s) named below:

Name	Registration Number
see attached	

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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OR

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OR

<input type="checkbox"/> Firm or Individual Name				
Address				
Address				
City	State	Zip		
Country				
Telephone	Fax			

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)
SIGNATURE of Applicant or Assignee of Record

Name	Craig W. Roddy		
Signature	<i>Craig W. Roddy</i>		
Date	7-31-03	Telephone	580-251-3012

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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DECLARATION		REGISTERED PRACTITIONER INFORMATION (Supplemental Sheet)	
Name	Registration Number	Name	Registration Number
Halliburton Energy Services, Inc. Practitioners		McAfee & Taft Practitioners	
William E. Shull	29,438	C. Clark Dougherty, Jr.	24,208
Michael D. McCully	29,566	Clifford C. Dougherty, III	31,607
Mark A. Smith	30,220	E. Harrison Gilbert, III	29,156
William M. Imwalle	35,904	Neal R. Kennedy	31,383
Paul I. Herman	37,349	Michael J. LaBrie	39,507
Robert A. Kent	28,626	Anthony L. Rahhal	37,562
Craig W. Roddy	36,256	Jean L. Pinkston	45,014
John W. Wustenberg	35,415	William D. Hall	35,535
Scott F. Wendorf	48,029		

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.**

Declaration — Registered Practitioner Information (Supplemental Sheet) (PTO/SB/02C)(1-1.4)

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**



Declaration
Submitted
with Initial
Filing

OR



Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Dock t Number

HES 2003-IP-011145U1

First Named Inventor

Jiten Chatterji

COMPLETE IF KNOWN

Application Number

Filing Date

Art Unit

Examiner Name

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Compositions and Methods for Preventing Coagulation of Water-In-Oil Emulsion
Polymers In Aqueous Saline Well Treating Fluids

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International:

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/>		Customer Number or Bar Code Label	28857	OR	<input type="checkbox"/>	Correspondence address below
Name						
Address						
City			State		ZIP	
Country		Telephone			Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR :				<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name Jiten (first and middle [if any])				Family Name Chatterji or Surname		
Inventor's Signature <i>J. Chatterji</i>					Date 7/30/03	
Duncan Residence: City		OK State		U.S. Country		U.S. Citizenship
Mailing Address 2213 Scott Lane						
Duncan City		OK State		73533 ZIP		U.S. Country
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name Bobby J. (first and middle [if any])				Family Name King or Surname		
Inventor's Signature <i>Bobby J. King</i>					Date 7-31-2003	
Duncan Residence: City		OK State		U.S. Country		U.S. Citizenship
Mailing Address Route 1 Box 16V						
Duncan City		OK State		73533 ZIP		U.S. Country
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.						